

DNH

ROBERT POLUS
2909 Whyngaught Ct SE
Rochester, MN 55904
(507) 358-4013
(612) 806-1551
Robertpolus@yahoo.com

OBJECTIVE

To Obtain Skills and Trades to Better my Future and Reach Personal Goals

JOB HISTORY/DUTIES

Ground Worker

Lentz Care Services
Rochester, MN

Start Date: Feb 2011 End Date: March 2013

I mowed lawns, I removed snow and I also rebuilt homes n cleaned out forclosed homes. I also did work orders. I also did ground cleaning.

Maintenance Assistant

Park Plaza Apts.
Rochester, MN

Start Date: Jan 2008 End Date: Mar 2010

Completed Specified Work Assignments. I did ground keeping. I also rebuild the apts and did work orders and cleaning for the apts.

Youth Worker

Boys & Girls club
Rochester, MN

Start Date: May 2008 End Date: Aug 2008

Monitor Youth in Daily Activities Maintain Positive Relationships with all Youth Involved
Instruct/Teach/Plan Daily Activities.

Auto Body Assistant

Auto Shop
Red Wing ,MN

Start Date: Feb 2007 End Date: Mar 2008

Vehicle Maintenance including Oil Changes, Brake Replacement and Exterior Body Touch Ups. I did check ups and work orders.

EDUCATION

Major: Generals
Southeast Technical College, MN
GPA: 3.5
Courses:

LICENSES/CERTIFICATES/ADDITIONAL TRAINING

CPR & First Aid

2010
American Red Cross MN

ADDITIONAL SKILLS

I work well with other people and I work well with my hands. I like to help people and to build them up so they can be successful in many aspects. I'm a great listener and I catch on quick to things . I'm a leader

not a follower. I take pride in my work.



CMG APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS AND A BACKGROUND CHECK WILL BE COMPLETED

PLEASE COMPLETE PAGES 1-5 DATE 9.30.13

Name Polus Robert Alton
Last First Middle Maiden

Present address 2909 Whybraught Ct SE
Number Street
Rochester MS 55904
City State Zip

Social Security No. 484-15-3384

Telephone 507 358-4013 E-Mail _____

If under 18, please list age _____ Referred by friend

Position applied for (1) North plant Shift available to work
 and salary desired (2) \$8.50 per hr 1st _____
 (Be specific) 2nd X
3rd X

How many hours can you work weekly? 40+ Can you work nights? yes

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

When available for work? A.S.A.P.

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
 No Yes If so, please explain _____

Do you anticipate any absences from work on a regular basis?
 No Yes If so, please explain _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ___ No Yes

If yes, explain number of conviction(s), nature of offense(s), dates of conviction(s), sentence(s) imposed, and type(s) of rehabilitation. _____

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? ___ Yes No

What is your means of transportation to work? my wife

Driver's license number _____ State of issue _____

Operator ___ Commercial (CDL) ___ Chauffeur ___

Expiration date _____

Have you had any accidents during the past three years? ___ Yes No

If so, how many? _____

Have you had any moving violations during the past three years? ___ Yes No

If so, how many? _____

Please list two references other than relatives or previous employers.

Name Kira Ferguson Name Mike Crum

Position Student/charter Position Student

Company _____ Company _____

Address NA Address NA

Telephone (507) 358-4013 Telephone (612) 806-1557

APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE RESERVE OR NATIONAL GUARD? Yes No

Branch _____ Specialty _____

Date Entered _____ Discharge Date _____

WORK EXPERIENCE

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

RESUME

Name _____ Position _____ Company _____ Address _____ Telephone (____) _____	Supervisor name _____	
	Employment dates	Pay or salary
	From	Start
	To	Final
	Your last job title _____	

Reason for leaving (be specific) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company.

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	To	Final
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May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____

**PLEASE READ CAREFULLY
APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Corporate Management Group, Inc.,

I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Corporate Management Group, Inc. (CMG), or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by an officer of CMG. Both the undersigned and CMG may end the employment relationship at any time, without specified notice or reason. If employed, I understand that CMG may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts will result in my disqualification from consideration for employment or, if discovered after I begin employment, will result in my termination. I hereby give CMG permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release CMG from any liability as a result of such contact.

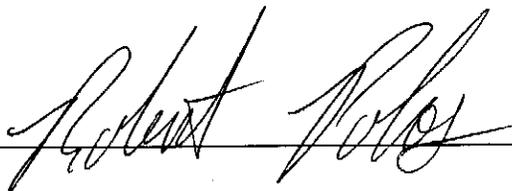
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by CMG policies.

I release CMG and other persons or entities from any claims that might be based on CMG's decision to conduct a background check.

I understand that, in connection with the routine processing of your employment application, CMG may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. Upon written request from me, CMG will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with CMG shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with CMG is terminable at will for any reason by either party.

Signature of applicant



Date:

9.30.13